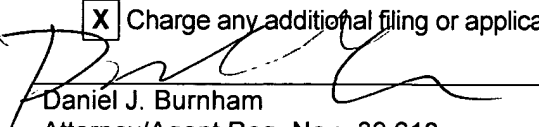


<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 247168-000035USC1		
Application No. 09/237,605		Filing Date January 25, 1999	Examiner Paul Prebilio	Art Unit 3738	
Applicant(s): Richard J. Lazzara					
Invention: Infection-Blocking Dental Implant					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	17	- 46 =	0	x 50.00	0.00
Independent Claims	3	- 10 =	0	x 210.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ <u>810.00</u> to cover the RCE filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-4181/247168-000035USC1</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Daniel J. Burnham Attorney/Agent Reg. No.: 39,618			Dated: <u>January 11, 2008</u>		
NIXON PEABODY LLP. 225 W. Washington, Ste. 2600 Chicago, Illinois 60606-3418 (312) 425-3900					